

# AAP Recommended

The American Academy of Pediatrics recommends newborn hearing screening.

A good schedule is

**One Month**—Screen by one month of age, preferably before hospital discharge.

**Three Months**—Diagnose by three months of age; follow up with full testing for all infants who are referred.

**Six Months**—Early intervention by six months of age; amplify with hearing aids, therapy, and parent training.

## Why Bother?

- The first year of life is critical for language development.
- A child who wears hearing aids early may have **no** language delays; the longer you wait the more certain the language delay.
- Early intervention means better communication, learning, and discipline.
- No child is too young to test.
- Although newborns cannot “raise their hands to the sound,” tests such as ABR, ASSR, and OAE give surprisingly accurate results.
- Waiting won’t make it go away.

## Why Can’t I Just Do the Testing?

Three good reasons:

- Hearing tests in your office aren’t as accurate because the baby often reacts visually to a pen clicking or hands clapping.
- Soundproof rooms and audiological equipment take away these disadvantages.
- Audiological tests are inexpensive and often covered by insurance.

Please take the time to choose an audiologist who is good with children. Give your parents the name, address, and phone number of this person, and consider making the appointment for them.

## Read more

### ... about Newborn Hearing and Hearing Loss in Children at:

[www.infanthearing.org](http://www.infanthearing.org)

[babyhearing.org](http://babyhearing.org)

[hearingexchange.com](http://hearingexchange.com)

[listen-up.org](http://listen-up.org)

[agbell.org](http://agbell.org)

[johntracyclinic.org](http://johntracyclinic.org)

[cuedspeech.org](http://cuedspeech.org)

[deafchildren.org](http://deafchildren.org)

To learn more about hearing screening, or

To talk to a parent who has been there, or

To get advice from an audiologist,

**Call Tennessee Newborn Hearing Program**

**(615) 741-8530 or**

**(615) 262-6160**

*No child is too young to test.*



State of Tennessee  
Department of Health  
Newborn Hearing Screening  
Cordell Hull Building, 5th Floor  
425 Fifth Avenue North  
Nashville, Tennessee 37247-4750

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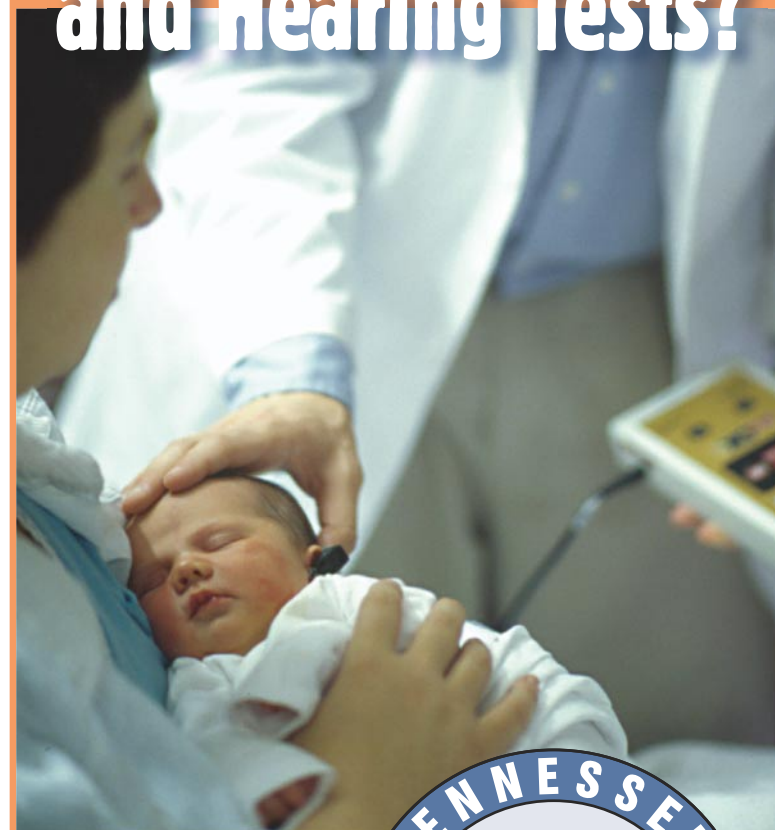
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FOR PEDIATRICIANS  
FAMILY PRACTITIONERS • NURSING TEAMS

# Why Bother With Newborn Hearing Screens and Hearing Tests?



*Whenever a parent has a concern, schedule a hearing test.*



# What's the Difference Between a Hearing Screen and a Hearing Test?

Becca's baby passed the newborn hearing screen but she reports that her baby doesn't turn to her voice and doesn't startle to loud noises. An audiological test confirms that the baby is deaf.

As with any screening, some results will be accurate and some will not. Only accurate audiological testing can verify the presence or absence of a hearing loss. **Some hearing losses develop after birth, and hearing can change at any time.** Hearing losses detected through screenings can be permanent, temporary, in one ear or two, or no loss at all.

**Recommend, and arrange with an audiologist, a hearing test any time a parent is concerned.**

## Just Say It

No healthcare professional likes to be the bearer of bad news. However, too many infants and children spend soundless years because a well-meaning provider assured a parent to "just wait." So, with compassionate directness, just say what needs saying. Yes, some babies do have hearing loss, but yes there is always something parents can do to help a baby with hearing loss. Babies with hearing loss are no different than other children. See the brochure "Talking With Parents About Hearing Loss" for more detailed ideas.



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# There Is So Much Parents Can Do!

With today's technology, almost every baby can hear more. The earlier the child is diagnosed, the better these strategies work. These technologies include:

- Digital hearing aids
- Analog hearing aids
- Cochlear implants
- FM systems
- Speech and language training
- Sign language
- Cued speech



After a hearing loss is diagnosed, you and the parents can discover which combination of technologies and strategies will help the most.

Encourage the parent to begin with hearing aids. Suggest they try at least three different hearing aids before buying.

Hearing aids are not enough. **Listening training**—in which a professional shows the parent how to teach the child during daily routines—is critical.

# Where Can I Send Parents?

Resources abound. Here are several excellent ones:

- **John Tracy Clinic**—provides personalized letters and free correspondence courses at [johntracyclinic.org](http://johntracyclinic.org) or (800) 522-4582.
- **AGBell Association for the Deaf and Hard of Hearing**—provides periodicals, mentoring, brochures, a six-month free membership to new parents, and more at [agbell.org](http://agbell.org) or (202) 337-5220.
- **Listen-up.org**: You must be a parent to join this fabulous listserv, but the Web site is open to all.
- **Tennessee League for the Hearing Impaired**—offers services for all communication approaches at <http://www.lhh.org/> or (800) 270-1349 (voice & TTY).

# With Whom Do I Affiliate?

Begin with a skilled audiologist who works well with children. The more accurate the hearing tests, the better amplification and tools can be chosen.

Find in your area at least two qualified speech/language pathologists, preferably experienced in hearing loss, to whom you can refer your parents.

Find an ear/nose/throat specialist or otologist to watch physical causes of hearing loss.

# So the Team Is?

There are at least five people on the "hearing care team":

- 1 you, the primary care provider
- 2 the parents, who know their child best
- 3 one who does hearing tests—the audiologist
- 4 one who takes care of physical ears—the otologist or ENT
- 5 one who teaches how to move past the hearing loss—SLP/ therapist/parent trainer